2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 15, 2004
Secretary of State

DOCUMENT# H54713

Entity Name: NICOM CORPORATION

Current Principal Place of Business:

100 SECOND AVE
STE. 1201
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

800 SECOND AVENUE SOUTH
SUITE 380
ST. PETERSBURG, FL 33701 US

Current Mailing Address:

100 SECOND AVENUE
SUITE 1201
ST. PETERSBURG, FL 33701 US

New Mailing Address:

800 SECOND AVENUE SOUTH
SUITE 380
ST. PETERSBURG, FL 33701 US

FEI Number: 59-2624856 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LECOMPTE, MORRIS A.
100 SECOND AVENUE S.
SUITE 1201
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

LECOMPTE, MORRIS A.
800 SECOND AVENUE SOUTH
SIOTR 39-
ST. PETERSBURG, FL 33701 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 03/15/2004
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: LECOMPTE, MORRIS A.,
Address: 100 SECOND AVENUE, S., SUITE 1201
City-St-Zip: ST. PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: LECOMPTE, MORRIS A.,
Address: 800 SECOND AVENUE SOUTH SUITE 380
City-St-Zip: ST. PETERSBURG, FL 33701 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MORRIS A. LECOMPTE DPST 03/15/2004
Electronic Signature of Signing Officer or Director — Date